



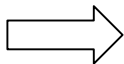
CHECKLIST FOR SUBMITTING YOUR 2004 LICENSE RENEWAL

REQUIRED DOCUMENTS

- A) License application (PI-079)
- B) Proof of insurance
- C) Incorporation, partnership, or assumed name documents (where applicable)
- D) Notarized Statement of Experience (PI-217) if adding a new category

A) LICENSE APPLICATION

- ___ 1. Is the current and full legal name of the business on the application?
- ___ 2. If you have moved, ___ Have you indicated your new street address on the application?
___ Have you indicated your new mailing address on the application?
- ___ 3. Have you filled in the emergency phone number and the fax number? Note: *E-mail address requested for 2004!*
- ___ 4. Are *all* the applicators full names and certification/registration numbers listed? Attach an additional sheet if necessary. *It is the responsibility of the license applicant to provide updates to MDA regarding any changes in status of any of the firm's applicators*



If you or your employees have recently taken certification exams, please attach copies of your receipt(s) that show the exam scores and dates.

- ___ 5. Have you selected all the license categories that your firm intends to provide application services for?
___ Does your listing of certified applicators cover all those categories?
- ___ 6. **IS THE APPLICATION SIGNED?** We cannot process an application that is not signed.
- ___ 7. Have you enclosed a check or money order for **\$100.00**, payable to **STATE OF MICHIGAN**?

B) CORPORATION/PARTNERSHIP/ASSUMED NAME DOCUMENTS

- ___ 1. Have you enclosed necessary business name documents? ___ Incorporation or Partnership verification
___ Assumed Name Certificate
- ___ 2. Are the certificates current and active (i.e. have not expired)?

C) PROOF OF INSURANCE

- ___ 1. Does the insurance certificate form include:
 - ___ Exact same legal name of the business as provided on the application?
 - ___ Exact same street address for the business as provided on the application?
 - ___ Correct effective and expiration dates that coincide with the license year? It is the responsibility of the license applicant to provide a current certificate of insurance to MDA – not the insurance agent's duty. You must mail or fax (517-335-4540) updated insurance information immediately to our Lansing office.
- ___ 2. Are the amounts of coverage correct? See enclosed PI-168 for amounts (green sheet).
- ___ 3. Does the insurance coverage include bodily injury and property damages that arise from pesticide applications?

D) NOTARIZED STATEMENT OF EXPERIENCE (required if you are adding a new category or you were newly licensed in 2003 and have a different applicator for 2004)

- ___ 1. Are you adding a new category (not on the renewal sticker) or were you newly licensed in 2003 but have a different applicator for 2004? If yes, you must also complete and submit a notarized copy of the enclosed Notarized Statement of Experience (Form PI-217). Note:
- ___ 2. Does the experience statement include the required timeframe and the contact persons along with their phone numbers?